

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>pb</i>	7539	<i>11/18</i>
O.I.P.E. CLASSIFIER		<i>71423</i>	<i>12-27-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>OC</i>	<i>61605</i>	<i>3-22-01</i>

INDEX OF CLAIMS

..... Rejected N
..... Allowed I
(Through numeral)..... Canceled A
..... Restricted O

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY